### MONTANA FIRE PREVENTION LICENSURE PROGRAM

301 South Park Avenue PO Box 200513 Helena Montana 59620-0513

Phone: 406-841-2350 Fax: 406-841-2050

E-MAIL: dlibsdfpl@mt.gov

WEBSITE: <a href="http://www.fireprotectionlicense.mt.gov/">http://www.fireprotectionlicense.mt.gov/</a>

#### APPLICATION PROCEDURES FOR:

### INDIVIDUAL ENDORSMENT LICENSE

ILLEGIBLE AND INCOMPLETE APPLICATIONS WILL BE RETURNED.
(Please allow 30 days for processing from the date that the Office has a complete routine application)

In accordance with Section 50-39-101, MCA, a person or entity shall obtain a license before engaging in the business of servicing fire extinguishers or before engaging in the business of selling, servicing or installing fire alarm systems, special agent fire suppression systems, or fire extinguishing systems.

### The following information is required in order for your application to be processed:

1) A complete application with accurate information and all required information. The information provided must be legible and printed in ink or typewritten.

One of the following criteria must be met for endorsement licensure. Please submit a copy of one of the following with the application:

- A) Certification of completion of all the NICET work elements provided for under Section 24.144.502(b) A.R.M. or completion of NICET II, with the verification of completion sent to the licensing program at the above address directly from NICET:
- B) Completion of a state approved apprenticeship program with the verification of completion sent to the licensing program at the above address directly from the approving bureau;
- C) Completion of manufacturer training with the verification of completion sent to the licensing program at the above address directly from the manufacturer; or
- D) Currently holds the equivalent of endorsement in another jurisdiction provided that the applicant meets or exceeds the qualifications for endorsement in Montana and verification of endorsement is sent to the licensing program at the above address directly from the other state, territory, or federal government.
- 2) Submit a \$25.00 one time processing fee plus the following endorsement fee for each type of endorsement you are applying for.

Sell Service or Install Fire Alarm Systems:\$100.00Sell Service or Install Fire Extinguishing Systems:\$100.00Sell Service or Install Special Agent Fire Suppression Systems:\$100.00

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**APPLICATION FOR:** 

# INDIVIDUAL ENDORSMENT LICENSE

License Fees: \$25.00 application fee \$100.00 per endorsement type							
Type of license endorsement applying for (check all that apply):  Sell, service or install fire alarm systems Sell, service or install special agent fire suppression systems Sell, service or install fire-extinguishing systems							
Please indicate below, and submit one of the following  Verification of completion of an approved a  Verification of completion of the work elements  Verification of manufacturer training directly	apprenticeship ents of the N	p program directly from the sponsor of the program ICET level II directly from NICET					
Social Security Number							
Full Name							
Last	First	Middle					
Other Name(s) Known By							
Gender Date of Birth	Fo	reign ID Number					
E-mail Address							
Please indicate your preferred mailing address							
Home							
Business							
Applicant Desidential Information	Δ	alicent Family or Information (licensed by since on artists)					
Applicant Residential Information  Phone		plicant Employer Information (licensed business entity) siness Name					
Fax		one					
Address		x					
Zip Code	Ac	ldress					
City, State	Cit	y, State					
	_						
	Ziţ	)					
	Lic	cense Number:					

All applicants must answer the following questions. If you answer yes, give specific details (names of organizations, dates, reasons, and outcome) on a separate sheet of paper.						
1.	Have you ever a	re you ever applied for a Montana fire licensure? If yes, attach a detailed explanation.				
2.		eve you ever applied for a fire licensure in any other state? If yes, attach detailed explanation giving name of state, date applied for and results.				
3.		ou ever been denied the right to hold a fire licensure in any state? attach a detailed explanation.				
4.		a licensing agency ever taken adverse or disciplinary action against license (certificate)? If yes, attach a detailed explanation.				
5.	Have you licens If yes, attach a	☐ Yes ☐No				
6.	Has a complain or unprofession	☐ Yes ☐ No				
7.	Has any legal or fitness to prac	☐ Yes ☐ No				
8.	Have you ever been expelled from or asked to resign from any professional organization or been censured by a professional organization of which you were a member? If yes, attach a detailed explanation.					
9.	Have you ever been charged with or convicted of a crime (including a plea of no contest or deferred prosecution) relating to, or committed during the course of your professional practice, involving violence, use or sale of drugs, fraud, deceit, or theft, whether or not an appeal is pending? You may omit:(1) traffic violations for which you paid a fine of \$100.00 or less and (2) charges or convictions prior to your 16th birthday. If yes, attach detailed explanation.					
10.	Have you ever been charged with fraud, formally or informally, in any civil proceeding?  If yes, attach a detailed explanation.					
11.	Do you have any physical or mental condition, which has in the past three years adversely affected your ability to practice this profession, including but not limited to, a contagious or infectious disease involving serious risk to the public? If yes, attach a detailed explanation.					
12.	Have you, within the last three years, used alcohol or any other mood-altering substance in a manner, which adversely affected your ability to practice this profession? If yes, attach a detailed explanation.					
13.	Do you currently hold a fire license in Montana or another state? If yes, provide the following information: (Attach a supplement sheet if necessary).					
List licenses from other jurisdictions:						
State/P Territor	rovince/	License Number	Date Issued	Is it Current	Class/Type License	
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## **AFFIDAVIT**

I authorize the release of information concerning my education, training, record, character, license history and competence to practice, by anyone who might possess such information, to the Montana Fire Prevention Licensing Program.

and complete to the best of my knowledge statement or evasive answer to any question subsequent revocation of licensure on ethic applicable licensure laws of the State of Mo	ne information included in my application to be true. In signing this application, I am aware that a false on may lead to denial of my application or cal grounds. I have read and am familiar with the ontana and instructions to applicants for licensing. In these documents as the basis for my application.
Legal Signature of Applicant	Date
For a verification	n upon oath or affirmation
State of(County) of	
Signed and sworn to (or affirmed) before m	ne on
by (Name(s) of person(s) making statemen	nt)
	(Signature of Notarial officer)
(Seal)	Title (and Rank)
	Residing at
	[My commission expires: